McNELLY, IRMA L. [R145/256]

R145/256

CERTIFICATE OF DEATH.

No. of BURIAL PERMIT. 6,581.

DISTRICT OF COLUMBIA.

No. of Record. 3984

FULL INSTRUCTIONS FOR THE GUIDANCE OF THOSE USING THIS BLANK, AND SPACE FOR REMARKS MAY BE FOUND ON THE OTHER SIDE.

1. Date of this Death Aug. 6th 1902
2. Full Name of Deceased Irma McNelly
   If an unnamed infant, insert full names of both parents.
3. Sex: ~~Male~~ Female.
4. Age: Years 1 Months 9 Days
5. Color. White. ~~Colored~~. ~~Indian~~. ~~Chinese~~. Japanese.
6. Conjugal Condition. Single. ~~Married~~. ~~Widowed~~. ~~Divorced~~.

Under sex, color and conjugal condition, strike out the words not applicable.
Under color, the term "colored" includes all of African descent, whether of pure or mixed blood.

7. Occupation —
8. Birthplace of Deceased D.C.
9. Birthplace of Father D.C.
10. Birthplace of Mother Va.

If born in the United States, give State, Territory or District; otherwise, give country.

11. Duration of Residence in this District Lifetime
12. Place of Death Great Falls Va.
13. Cause of Death — DURATION.
    Primary
    Immediate
14. If Death Occurred in an Institution, give:
    Name of Institution
    Length of Time Deceased was an Inmate
15. If Deceased did not Die at his or her Residence, give:
    Place of Residence 412 - 5th st. S.E.

I hereby certify that I attended the deceased professionally during last illness.

M. D.,

Address

To be Filled Out and Signed by the Undertaker:

Place of Burial Congressional Date of Burial Aug. 7th 1902

If Body is to be Buried Outside of the District, state:

Route of Transportation Date of Removal 190

Signature E. M. Botelor Undertaker,

Address 639 - Pa. Ave S.E.

THIS SPACE RESERVED FOR BINDING.

A. LEIGH, M. D.,
COLVIN RUN,
FAIRFAX COUNTY, VIRGINIA.

O.B.
X.O.X.
8.7.02.

Aug 6, 1902

I hereby certify that Irma L. McNelly died of Cholera Infantum Aug. 6, 1902 non contagious

A. Leigh, M.D.